



✓ PROTOCOLS of the proceedings of a Committee appointed by the
INTERNATIONAL SANITARY CONFERENCE, at its session held in Washington,
January 12, 1881.

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PROTOCOL No. I.

WASHINGTON, D. C., *January 12, 1881.*

The Committee created by the INTERNATIONAL SANITARY CONFERENCE for the purpose of considering and reporting upon the various projets brought before said Conference, met at the State Department, Wednesday, January 12, at 4 o'clock P. M.

There were present—

Mr. HERMANN A. SCHUMACHER, Mr. EDOUARD SÉVE, Dr. RAPHAEL CERVERA, Dr. JAMES L. CABELL, Dr. THOMAS J. TURNER, Mr. J. HUBLEY ASHTON, Mr. JAMES LOWNDES, Mr. EDWARD M. ARCHIBALD, Dr. J. C. TACHÉ, Dr. IGNACIO ALVARADO, Dr. F. J. VAN LEENT, Dr. J. J. DA SILVA AMADO, all accredited delegates to the INTERNATIONAL SANITARY CONFERENCE.

On motion of Mr. SÉVE, the special delegate from Belgium,

Mr. E. M. ARCHIBALD was elected Chairman, and Dr. THOMAS J. TURNER was elected Secretary.

The Secretary placed before the Committee the following replies to the memoranda issued by the Hon. W. M. EVARTS, Secretary of State of the United States, and dated Washington, D. C., July 29, 1880, presented by Señor Don SIMON CAMACHO, (the delegate from Venezuela.)

The projet of Señor CAMACHO, chargé d'affairs of Venezuela, was laid before the Committee by the Secretary.

It is as follows:

Questions Answered by Venezuela.

I.

Who should be the certifying officer or authority as to the sanitary condition of ports and places and of vessels?

Answer. Such a commission should be in charge of an instructed physician of good standing, appointed by the General Government, and held responsible. He will be aided in his investigation by a board of citizens of known honesty and patriotic interest, appointed by the municipal council of the place, who will likewise fix the number of members. This board to be presided over by the president of said council, and the responsible physician shall always form a part of it.

II.

How can the certifying authority obtain trustworthy information as to the actual sanitary condition of ports and places, and as to the presence of contagious diseases?

Answer. By residing in the port, taking note daily of the death certificates issued by the other physicians of the place and the city physicians, when there are any, ascertaining what sickness exists in the hospitals of the port or place, and by keeping in constant communication as to the sanitary condition of the ports and places of the Republic. In procuring all these data the responsible physician shall be actively assisted by the Board of Health.

III.

When yellow fever or cholera exists at or in the vicinity of a port or place, what examination should be made of a vessel sailing therefrom to secure a trustworthy knowledge of her sanitary condition?

Answer. Every vessel about leaving port should, prior to receiving cargo, be visited by the sanitary authority, or by a physician delegated by the same, and submitted to the following precautions: It should be carefully inspected throughout, and orders given for all indispensable hygienic measures, as well regarding cleanliness as food and drink; the water and means of preserving it should be examined; likewise the clothing of the crew, correspondence, &c.

Passengers and crew should be examined, and no one should be allowed to embark who is affected by yellow fever, cholera, and other cases of contagious infective diseases.

IV.

To what extent, and under what conditions, should a clean Bill of Health be considered as affording satisfactory evidence that the vessel is free from danger of conveying infectious disease?

Answer.

1st. The certificates of the health physicians should be entitled to full faith, not only because of their position and standing, but also because of the legal responsibility they are under.

2d. As another guarantee, there should be required the certificate of the Consul of the nation having jurisdiction over the first port to which the vessel is bound.

3d. The health physician of the place where a vessel arrives, who will carefully inspect the condition of the same as to the salubrity, will be the third guarantee that no epidemic or contagious disease exists on board said vessel.

4th. The captains and masters should be charged with the duty of constant vigilance to keep their vessels during the passages always as clean and neat and in the other hygienic conditions they were in when leaving port of departure. Any omissions or violations on this point should be punished according to the penal code to be established by the future conference.

V.

In what way can trustworthy information be obtained from ports or places which have imperfect or unsafe quarantine and sanitary regulations, and which may be unwilling or unable to adhere to the proposed international system?

Answer.

1st. In the first place, every country or Government will instruct its Consuls in places that have not adhered to the Conference to notify those that have adhered, with the greatest care, precision, and promptness, whenever contagious or infective diseases prevail in such places.

2d. The adhered Governments and their health physicians will immediately notify each other whenever they learn in any way that in any of the non-adhered countries either of the sickness in question has made its appearance, or prevails in any of their ports or vicinity.

VI.

Whether a schedule of graduated penalties could be fixed, to be exacted for various offences arising under the proposed international system?

Answer. Yes; penalties should be imposed and the Sanitary Conference should approve a code, for which purpose every member should bear in mind the sanitary laws of his respective country.

(Signed) SIMON CAMACHO.

The Secretary also placed before the Committee the memorandum of the Hon. W. M. EVARTS, Secretary of State of the United States, dated Washington, July 29, 1880, as follows:

DEPARTMENT OF STATE,
WASHINGTON, *July 29, 1880.*

Memorandum in relation to points proposed to be submitted to an INTERNATIONAL SANITARY CONFERENCE:

A joint resolution of the Senate and House of Representatives of the United States, approved May 14, 1880, authorized the President "to call an INTERNATIONAL SANITARY CONFERENCE, to meet at Washington, District of Columbia, to which the several Powers having jurisdiction of ports likely to be infected with yellow fever or cholera shall be invited to send delegates properly authorized, for the purpose of securing an international system of notification as to the actual sanitary condition of ports and places under the jurisdiction of such powers, and of vessels sailing therefrom."

This resolution has its origin in the practical difficulties which have been encountered in the administration of the regulations and rules recommended by sanitary experience and framed by the legislation of the country to the end of preventing the introduction and spread of yellow fever, cholera, and other contagious or infectious diseases in the territory of the United States. The extensive prevalence of yellow fever in certain parts of this country during the past two years, and the almost continual existence of the danger of the introduction of such contagious or infectious diseases as yellow fever and cholera by vessels coming to this country from infected ports abroad, gave rise to such legislative measures, but the difficulty in their application has been chiefly owing to the fact that in certain foreign ports where infectious or contagious diseases have existed, or were supposed to exist, the local authorities have shown some hesitation as to coöperation with the consular and medical officers of the United States in carrying out regulations deemed essential by this Government as a sanitary safeguard.

Moreover, in consequence of the vague and untrustworthy evidence obtainable in some cases as to the sanitary condition of suspected foreign ports, vessels coming thence to the United States have in some instances, as it has afterwards appeared, been subjected to unnecessary quarantine in the ports of this country. On the other hand, vessels from non-infected ports of the United States have been compelled to submit to like unnecessary and vexatious delays by the quarantine regulations of other countries, based upon imperfect knowledge of the sanitary condition of American ports.

The joint resolution of Congress, quoted above, contemplates only securing "an international system of notification as to the actual sanitary condition of ports and places," and does not touch on the broader and more intricate question of the preventive sanitary measures imposed in the ports of each country in conformity with its own laws and in proportion to the danger of outward communication and internal spread of epidemic disease at the port of introduction. The Government of the United States, recognizing the essentially local character of quarantine requirements, and their adaptability to the sanitary conditions and risks in the districts where they are applied, would not seek to propose any international code of general quarantine laws, even did the system of State and Federal Governments in the United States favor bringing the sanitary precautions of the sea-board States from Texas to Maine, with all their varying conditions, under one governmental code.

But the President is of the opinion that the great inconveniences and losses which the commerce of the world has been, and is now, suffering from the delays and obstructions caused by unnecessary quarantines can, to a great extent, be relieved by the establishment, as contemplated by the Congressional joint resolution of May 14, 1880, of an international system of notification as to the actual sanitary condition of ports and places likely to be infected with communicable or epidemic diseases; and, following the authorization of the resolution referred to, he has, therefore, deemed it proper to submit to the Governments of the chief maritime powers the expediency of holding a conference at an early day, in this city, to consider the subject of a proper and applicable scheme of such international notification.

The specific propositions which the President would desire to submit to the proposed Conference would include the following:

A. The establishment of a reliable and satisfactory international system of notification as to the existence of contagious and infectious diseases, more especially cholera and yellow fever.

B. The establishment of a uniform and satisfactory system of bills of health, the statements in which shall be trustworthy as to the sanitary condition of the port of departure and as to the condition of the vessel at the time of sailing.

The discussion of these points would involve, among others, the following questions:

I.

Who should be the certifying officer or authority as to the sanitary condition of ports and places, and of vessels?

II.

How can the certifying authority obtain trustworthy information as to the actual sanitary condition of ports and places, and as to the presence of contagious and infectious diseases?

III.

When yellow fever or cholera exists at or in the vicinity of a port or place, what examination should be made of a vessel sailing therefrom to secure a trustworthy knowledge of her sanitary condition?

IV.

To what extent and under what conditions should a clean bill of health be considered as affording satisfactory evidence that the vessel is free from danger of conveying infectious disease?

V.

In what way can trustworthy information be obtained from ports or places in countries which have imperfect or unsafe quarantine and sanitary regulations, and which may be unwilling or unable to adhere to the proposed international system?

VI.

Whether a schedule of graduated penalties could be fixed, to be exacted from vessels for various offences arising under the proposed international system?

The Secretary also placed before the Committee the memoranda presented by the delegates of the United States to the Conference at its session of this day, as follows:

Nations have at present ample power to prevent, without any breach of their international obligations, the introduction into their territories of contagious or infectious diseases. But there is often an omission to exercise that power when there is real danger or an unnecessary exercise of power to avert an imaginary danger. These mistakes arise from two sources: 1st, ignorance of the real state of the facts in the country where the danger lies; or, 2nd, the omission to communicate to other countries the knowledge which actually exists.

The remedies for these evils seem to be, in outline:

1st. That each Government should bind itself to obtain seasonable and accurate information of all facts bearing upon the public health in its territories.

2nd. Each Government should bind itself to communicate promptly its information to the other parties to the Conference.

3rd. Each Government should bind itself to give to the consul or accredited agent of the others access to all hospitals and all the records of the public health.

4th. Each Government consents that its ships before and after taking in cargo may be subjected to an examination in port by the agent of the country of destination to meet the sanitary requirements of the country of destination.

- 5th. No clearance shall be granted without a bill of health signed by the agent of the country of destination in the accompanying form. In case of no such agency in any port of clearance, or non-attendance or disability of such agent, the absence of such bill of health to work no injury in the country of destination.
- 6th. Penalties may be inflicted under general laws at the port of destination for violation of these rules or any declared offence against the public health.
- 7th. A Bill of Health granted in compliance with these rules shall be adequate evidence of the health of the ship at the port and time of departure.

INTERNATIONAL BILL OF HEALTH.

I,, (consul, consular agent, or other officer empowered by law to sign,) at the port of, do hereby state that the vessel hereinafter named clears from this port under the following circumstances:

Name of vessel:	Nature, (vessel-of-war, ship, schooner, &c.):
Tonnage:
Apartments for passengers, No.:	Guns:
Destination:	Where last from:
Name of medical officer, (if any):	Name of captain:
Total number of passengers: 1st cabin,;	Total number of crew:
2d cabin,; steerage,	Cargo:

VESSEL.

1. Sanitary condition of vessel, (before and after reception of cargo, with note of any decayed wood.) Note disinfection of vessel:
2. Sanitary condition of cargo:
3. Sanitary condition of crew
4. Sanitary condition of passengers:
5. Sanitary condition of clothing, food, water, air-space, and ventilation:

PORT.

1. Sanitary condition of port and adjacent country—
- a. Prevailing disease, (if any):
- b. Number of cases of and deaths from yellow fever, Asiatic cholera, plague, small-pox, or typhus fever during the week preceding—
- | | |
|------------------------|------------------------|
| Number of cases of— | Number of deaths from— |
| Yellow fever: | Yellow fever: |
| Asiatic cholera: | Asiatic cholera: |
| Plague: | Plague: |
| Small-pox: | Small-pox: |
| Typhus fever: | Typhus fever: |
- c. Population according to the last Census:
- d. Total deaths from all causes during the preceding month:
2. Any circumstances affecting the public health existing in the port of departure to be here stated:

I certify that the foregoing statements are made by....., who has personally inspected said vessel; that I am satisfied that the said statements are correct; and I do further certify that the said vessel leaves this port, bound for....., in the

In witness whereof I have hereunto set my hand and the seal of office, at the port of....., this....day of....., 188 ,....o'clock.

[SEAL.]

.....,
Consul.

The Committee then adjourned until 2 o'clock P. M., Thursday, January 13, 1881.

THE SECRETARY OF THE COMMITTEE:

THOMAS J. TURNER.

THE CHAIRMAN OF THE COMMITTEE:

E. M. ARCHIBALD.



PROTOCOL NO. 2.

Second day's proceedings of the Committee appointed by the INTERNATIONAL SANITARY CONFERENCE, January 13, 1881.

PROTOCOL No. II.

WASHINGTON, *January* 13, 1881.

The Committee met at 2 o'clock P. M. at the Department of State.

Present—

Mr. H. A. SCHUMACHER, Mr. EDWARD SÉVE, Dr. RAFAEL CERVERA, Dr. J. L. CABELL, Dr. T. J. TURNER, J. HUBLEY ASHTON, Esq., JAMES LOWNDES, Esq., Hon. E. M. ARCHIBALD, Dr. J. C. TACHÉ, Señor DON IGNACIO ALVARADO, Dr. F. J. VAN LEENT, and Prof. JOSÉ JOAQUIM DA SILVA AMADO.

The protocol of the last meeting was read and approved.

Mr. ASHTON laid before the Committee the following proposition, which was read, as follows:

It is proposed that the Committee take up and consider, in its order, each one of the propositions laid before the Conference by the delegates on the part of the United States.

The Chairman shall ask whether there are any objections to such proposition.

If none are stated, the proposition shall be recommended for adoption to the Conference.

If any objections are made to such proposition, the delegate shall state them briefly in writing, when the Committee will proceed to consider them.

After such consideration, a vote shall be taken on the proposition. If it be not carried the vote shall be reported to the Conference, together with the objections made to the same in the Committee without any recommendation, leaving to the Conference to determine whether or not the proposition shall be adopted or modified in its further deliberations.

If the proposition be carried notwithstanding the objections, it shall be recommended for adoption to the Conference.

Dr. CERVERA submitted the following:

The special delegate of Spain has the honor to present the following observations to the consideration of the Committee, charged to prepare the report which is to serve as a basis for the discussion of the principles of the INTERNATIONAL SANITARY CONFERENCE.

In the first place he finds an important and noteworthy difference between the propositions set forth in the memorandum submitted by the Government of the United States of America and those submitted to the Conference by the American delegates, and while he admits that the latter are derived from those set forth by the American Government, he begs leave to call attention to the curtailment or exclusion of the third and fourth, and to the limited development given to the four other questions submitted in the memorandum. It would have been better, in his opinion, to follow the suggestions contained in the memorandum, commencing the order of discussion with the paragraph designated A. Had this been done, a technical and thorough discussion of contagious and infectious diseases would have enabled us to agree upon the best and safest methods to be established in the international system which is sought; to return afterwards to paragraph B, and then to establish a uniform and satisfactory system of bills of health, as well as of other means which may lead to the same result. On this occasion the questions numbered 1 to 6 in the memorandum, and some others that might be added at the request of the delegates, would be treated in their place with more or less fullness. Is not this desired, and is it not sought to meet the wishes expressed in the memorandum? Why, then, forget the first proposition of the memorandum, which is perhaps the most important of all?

I desire to make the following observations to the propositions presented by the honorable delegates of the United States. I must remark in regard to the first that it is too

general and insufficient. The Governments should, indeed, procure reliable and full information as to the state of public health throughout their territory, but when such information does not come from men skilled in medical science it has no positive value. It is, therefore, necessary to add the establishment of a special medical corps in those countries where it does not exist, if it is desired to obtain credible information. Still more may be done. An international sanitary commission may be appointed in the various places bordering on the Gulf of Mexico. Where this may be desirable, said commission to do, with regard to the yellow fever, what has been done in Eastern countries with respect to the cholera by the commissions of Alexandria and Constantinople, which were appointed for this purpose, and by the physicians who were sent long before by France to various Eastern cities. As a matter of course the first proposition being once accepted and properly drawn up, the second and third are but corollaries thereto, and may very well be accepted with some amendments. As to the fourth, while I have no serious objections to its spirit, I desire to ask what kind of an examination is to be made on board of a vessel before and after it has taken in cargo, and how such examination may be made in order to satisfactorily meet the exigencies of each country, the object being to prevent contagious or infectious diseases?

The first portion of the fifth proposition may very well be accepted; but it is proper here to remark that the final paragraph of this proposition is too much at variance with the sanitary laws of Spain for it to be accepted without any reflection.

I here terminate my observations, adding nothing to the sixth proposition, which in fact does not affect the essential part of the questions proposed, but as to the seventh I must also state that a bill of health, whatever guarantee it may furnish, is never a sufficient guarantee of the health of the vessel.

WASHINGTON, *January 13, 1881.*

Dr. ALVARADO submitted the following:

The memorandum forwarded to our respective countries by the United States Government expressly marks out the points to be specially treated in the International Conference. The sub-committee will therefore have to take as basis of the report to be rendered to the Conference the questions proposed by the United States Government, and not the projet presented by the special delegates of said United States.

It would at first sight appear indifferent to take as basis one or the other document, inasmuch as the special delegates of the United States are the representatives in the Conference of the Government of this Republic; but as the Honorable the Assistant Secretary of State expressly declared during the last session of the Conference, in answer to the interpellation made on this point by Mr. OUTREY, the French Minister, that the projet presented by said delegates was to be considered as the private opinion of said delegates, and not as emanating from the United States Government, my opinion is that the sub-committee occupy itself with the direct examination of the questions contained in the above-mentioned memorandum in the order in which they are written thereon. Our respective countries will in this way respond to the invitation made to them, and this will not happen if we proceed otherwise.

This does not mean that we dismiss the projet of the North American delegates; it will, on the contrary, serve as much in the fulfilment of our mission (being, as it is, a conscientious study carefully prepared) as also the answers that several Governments have already given to that of the United States relative to the points in question. We will consider all those documents as private opinions which we will keep in mind in preparing our report, but not as the starting-point of our labors.

Consequently I have the honor to submit to the judgment of the Committee the following proposition:

"The Committee of the INTERNATIONAL SANITARY CONFERENCE will occupy itself at once with the direct examination of all and each one of the questions contained in the memorandum of the 29th of July, 1880."

Mr. SCHUMACHER submitted the following:

There are in the papers before us three principal questions of entirely distinct character.

I. The establishment of a reliable and satisfactory *international system of notification as to the existence of contagious and infectious diseases*, says the memorandum and the projet. That each Government should bind itself to obtain seasonable and accurate information of all facts bearing upon the public health in its territories, and to communicate promptly its information to the other parties to the Conference.

Connected with this question is the other: In what way trustworthy information can be obtained from ports or places in countries which have imperfect or unsafe quarantine and sanitary regulations, and which may be unwilling or unable to adhere to the proposed international system? That is, No. V of the memorandum, and not mentioned in the projet. Being these questions of general and of chiefly diplomatic character, our Committee, composed only by consuls-general and special delegates, has, as it seems to me, to recommend to the Conference to consider them at once in *pleno*.

II. The establishment of a uniform and satisfactory *system of bills of health*, the statements in which shall be trustworthy as to the sanitary condition of the vessels at the time on sailing. At this system the memorandum refers in Nos. I, II, IV, and VI, and the projet in Nos. 3, 4, 5, 6, 7. This matter, with all its details, appears to me as the principal field of our consideration; it combines questions of more or less technical character, and of the rights or duties of the consular service; it touches directly the shipping interests, especially of the countries the ports of which are not under the general obligation to ask from each vessel a bill of health. A discussion of these points may therefore be only possible for those members of the Committee who have yet received their instructions. I understand that some members are expecting them every moment.

III. Question III of the memorandum refers only to *yellow fever or cholera*, asking what examination in these special cases should be made of the vessels to secure a trustworthy knowledge of her sanitary condition. This point is entirely technical; therefore I believe that only the technical members of the Committee are able to give full answer.

I therefore beg to propose that the Committee will begin its discussions with the question whether we will accept the mentioned separation of matters as *modus operandi*.

Prof. AMADO submitted the following:

I think that the propositions of the delegates of the United States are generally acceptable to my country, and are even in consonance with the laws governing this matter. There are doubtless practical difficulties, but it is for the Conference to overcome these by an international agreement.

As regards the two first propositions, I think that the best expedient is for all the countries represented at this Conference to pledge themselves to publish medical bulletins of medical statistics, whereby the sanitary condition of the principal cities and maritime ports may be accurately known. Such a publication, as is issued in this city, (National Board of Health Bulletin,) and at Brussels, Paris, Nancy, Havre, Marseilles, Copenhagen, Turin, Rome, Lisbon, &c., would inform the sanitary authorities concerning the matters of interest to international hygiene.

I find no objection to permitting consuls and other accredited agents to visit hospitals and to receive all necessary information in order that they may perform their duties well. This is according to the customs of my Government. Article 6 of the Portuguese maritime health regulations requires the consuls of Portugal to inform themselves constantly concerning the sanitary condition of their districts, and to endeavor to learn whether there are any cases of plague, yellow fever, cholera, small-pox, exanthematic typhus, and other contagious maladies of an epidemic character, and also whether there is any epizooty or contagious typhus among horned cattle and exudative peri-pneumonia; for which purpose consuls must be on good terms with the managers of the civil and military hospitals, the departments of public health, the most esteemed practising physicians, and finally with the directors of veterinary institutions.

It is the duty of Portuguese consuls to communicate to their Government in the most expeditious manner, without losing a moment, (such are the words of the regulation,) the appearance of any cases of plague, yellow fever, or cholera on land or on board of vessels

incurred in Portuguese ports, and also any case of epizooty, stating the day or days on which the cases appeared, even if they have not proved fatal.

The publication of the statistical bulletin which I propose will greatly facilitate the performance of this duty by consuls.

At the Sanitary Conference held at Vienna, Mr. Dickson, the English delegate, stated that in the British Indies the custom-houses at the ports from which vessels sail issue bills of health, but the Sanitary Commission at the same time furnishes the necrological table of the preceding week, so that, to use the expression of this learned English physician, by this system information is obtained as to the sanitary condition by two means, namely, by statement and by fact.

Our bills of health contain nearly all the propositions made by the delegates of the United States. They are even more minute than the French bills.

I do not think that the signature of a consul is of the slightest importance as a guarantee of the health of a vessel, if he is not allowed to examine it thoroughly. Our regulations make it obligatory upon captains and commanders to permit consuls and other health officers who need to examine them to go on board of their vessels. (Art. 11, No. 2.) It also renders it obligatory upon consuls to address to captains or commanders who ask for a bill of health, and to the crews and passengers on board of their vessels, all questions that they may think proper in order to learn the hygienic condition of the vessels, and to endeavor to visit and inspect the same. I simply reproduce the provisions contained in the general maritime health regulations, which took effect in pursuance of the decree of November 12, 1874.

I therefore see no objection to approving the fourth proposition of the delegates of the United States if reciprocity as regards these measures is agreed to.

There remains, however, the practical difficulty of rendering the examination of the vessel useful and of making the bill of health a reliable document.

Among us the title of physician is, other things being equal, a recommendation for appointment as consul, but in reality I think that very few physicians have availed themselves of this prerogative; and yet it is incontestable that some competency in medical matters is required in order to issue a bill of health properly.

I think we can find the means of solving this difficulty in an international institution of health officers. Health officers residing in the country in which endemic or serious epidemic diseases prevail can assist consuls in their task of informing their Governments of all sanitary changes which require precautionary measures, and they can also subject vessels to medical inspection.

The Portuguese regulations provide that if a vessel brings no bill of health, and no consular certificate in lieu thereof, the chief of the sanitary police shall enable the captain to make amends therefor by telegraphic information derived from the proper officers in the ports or places from which he has sailed, informing him at the same time that he must pay a fine and also the cost of the telegrams. (Art. 66.)

In the absence or disability of Portuguese consuls, vice-consuls and all the officers who legally supply their places, bills of health and visés may be issued by the consular agents of France, England, Spain, Italy or other nations on friendly terms with Portugal. (Art. 7.)

Admitting that bills of health furnish in general sufficient evidence of the sanitary condition of the port and of the vessel at the time of the latter's departure, the Portuguese regulations nevertheless allow one exception which seems to me very proper. It is when an epidemic becomes developed a few days after the departure of a vessel; thus the consul in a port who had issued a clean bill, if it should happen that the cholera or yellow fever appeared in that port within five days after the departure of the vessel, or cases of plague in eight days, would be obliged to transmit the intelligence by telegraph to the Portuguese Government and to the heads of the health departments. In all cases of doubt the sanitary authorities of Portuguese ports must correspond by telegraph with the consuls in order to obtain all necessary information.

Mr. Séve stated that, in his opinion, the first step would be to find out what had already

been done by the various sanitary conferences already held. He stated further that he had a work on the subject, which he would present to the Committee. It contained a history of these conferences, and the writer urges the establishment of a national health authority in every country, the duty of this board being to study all the causes which affect the public health, and not epidemics alone. He also urges the formation of local boards in each country to act in concert with the national authority, and suggests the creation of an International Board of Health. Mr. SÉVE closed by saying he hoped this projet would be considered by the Committee, and that he would be permitted to present a special report later on.

Dr. VAN LEENT stated that in Holland the magistrates gave the bills of health.

Dr. TACHÉ submitted the following :

There are, in the broad, before the Conference two distinct propositions :

a. The establishment among nations of a system of constant mutual notification of the general state of health of each country, and of the appearance and disappearance of infectious disease anywhere.

b. The allowing by nations of a sanitary inspection being made of hospitals, ships, and their crews, passengers, and cargoes, by authorized agents of any one and all of the contracting parties, at ports situate within the jurisdiction of the other contracting parties, no matter the nationality of such ships, persons, and things.

The first of these propositions, as easily perceived, has a twofold object—the mutual exchange of general information amongst nations in regard of sanitary matters, and the warning of any impending danger threatening some, several, or all countries in intercourse with each other.

The second might be technically described as intended to be the prophylaxy of evils of which quarantines are the remedy.

There cannot be two opinions, in a purely sanitary point of view, about the rectitude in principle and the practical utility of these two proposals, framed by the United States National Board of Health. No one can contradict to their intrinsic goodness. The difficulties in the mode of carrying them into practice come when they are confronted with the exigencies of nations' supremacy in matters of that sort within each one's territory and with the requirements of commercial and shipping interests of the various countries in daily communication one with another.

There is, however, a very great difference in this respect between the two typical propositions of *international notification* and of *international inspection*. The difficulties attending the adoption and practice of the first, if there are really difficulties, are of a trifling and easily surmountable nature, while the intricacies of the second proposition are regarded by many as assuming a somewhat formidable character, which, nevertheless, cannot be considered as absolutely insuperable.

Starting from that *exposé* of matters as they stand, I beg permission to suggest that each of the said two propositions be taken up separately and decided upon as distinct, although intimately connected, subjects for deliberation.

I would furthermore suggest that the questions be put in the form adopted by the United States delegates in their projet; that is, in the form of positive propositions to be adopted, amended, or rejected, as the Committee, first, and then the Conference shall see fit; and that every secondary proposition appertaining to each of the two separate subjects be taken up in two distinct series, so that the subject of *international notification* be definitely disposed of before entering into the consideration of the subject of *international inspection*.

For example:

On the subject of International Notification—

Principle proposed for admission:

— It is the opinion of this Conference that it is highly desirable that an international mutual notification on sanitary matters, and on the appearance and disappearance of infectious diseases should be adopted amongst nations.

Should this be admitted, then sections 1 and 2, and possibly 3, of the United States

delegates' projet would follow for deliberation and final decision, whether they be rejected, adopted, or modified by amendments receiving the acquiescence of the Conference.

Then, and not till the subject of *International Notification* is exhausted, would come the subject of *International Inspection* again by deciding first, on the principle in the following words or others to the same purport :

— It is the opinion of this Conference that it would be advantageous to allow certain sanitary inspection to be made by foreign agents in ports of various nations, subject to such regulations as are necessary for the safeguard of each country's sovereignty and of each country's commercial interests.

Then, if such principle, with its mitigation, were adopted, would come the time to consider the 3d, 4th, 5th, 6th and 7th propositions of the United States delegates' projet.

A strict adherence to such or similar proceeding, by serial order, would avoid the danger of further delay which are to the serious inconvenience and detriment of such members of the Conference as do not reside in Washington, some of whom are most anxious about other public business entrusted to their care.

Dr. TACHÉ offered then the following resolution, which was read, considered, and agreed to :

Resolved, That this Committee recommend to the INTERNATIONAL SANITARY CONFERENCE that it be admitted as an international principle of sanitation that it is highly desirable to adopt an international system of notification concerning sanitary matters and the appearance and disappearance of contagious or infectious diseases.

Dr. ALVARADO offered the following, which, after being read and discussed, was disagreed to :

Resolved, That the details of discussion of this Committee be based on the memorandum of the Honorable the Secretary of State of the United States, under date of July 29, 1880.

Dr. TACHÉ submitted the following, which was read :

Resolved, That it is the opinion of this Committee that it would be highly advantageous to permit certain sanitary inspections to be made by foreign agents in ports of various nations, subject to such rules as are necessary for the safeguard of each country's sovereignty and of each country's commercial interests, and that the said opinion be expressed in the report of this Committee to the Conference.

Mr. SCHUMACHER moved that the words "by foreign agents" be stricken out.

The vote was taken, and it was decided in the negative.

The question then recurred on the original resolution.

Mr. SCHUMACHER stated that he had not yet received his instructions, and would have to suspend his vote on the resolution.

The vote was then taken, and the resolution of Dr. TACHÉ was adopted.

Then, on motion of Dr. CABELL the Committee adjourned until Friday, January 14, at one o'clock P. M.

THE SECRETARY OF THE COMMITTEE:
THOMAS J. TURNER.

THE CHAIRMAN OF THE COMMITTEE:
E. M. ARCHIBALD.

PROTOCOL NO. 3.

Third day's proceedings of the Committee appointed by the INTERNATIONAL SANITARY CONFERENCE, January 14, 1881.

PROTOCOL No. III.

SESSION OF JANUARY 14, 1881.

The Committee met pursuant to adjournment.

Present—

Mr. HERMANN A. SCHUMACHER, Mr. EDOUARD SÉVE, Dr. RAPHAEL CERVERA, Dr. JAMES L. CABELL, Dr. THOMAS J. TURNER, Mr. J. HUBLEY ASHTON, Mr. JAMES LOWNDES, Mr. EDWARD M. ARCHIBALD, Dr. J. C. TACHÉ, Dr. IGNACIO ALVARADO, Dr. F. J. VAN LEENT, Dr. J. J. DA SILVA AMADO.

The reading of the protocol of the second day, January 13, 1881, was dispensed with. Mr. EDOUARD SÉVE submitted the following:

[Translation.]

Proposed General Organization of Public Hygiene, by Dr. Th. Belval, presented by Mr. Edward Séve, Delegate of Belgium.

Propositions Adopted by the Medical Congress held at Brussels in 1875.

Hygiene considered in an executive point of view should comprise two distinct parts:

1st. A national organization.

2d. An international organization.

I.

1. The national organization would include the establishment by law in each country, and in all degrees of executive authority, of health and hygiene.

2. These would consist—

A. Of a superior board near the governmental authority;

B. Of a provincial (State) commission in each of the departments, provinces, prefectures, governments, *cordes*, or districts;

C. Of a local committee in each commune in which such an organization might be possible.

In communes whose small size will not permit the establishment of a committee, sanitary circumscriptions should be established, comprising various communes or sections of communes taken together.

3. The surveillance (and in case of need the execution) of the measures recognized as being of public utility should be exercised:

A. In a general way by the secretary of the superior board;

B. Throughout each province by the secretary of the provincial commission;

C. In each commune or group of communes by the secretary of the local committee in the capacity, respectively, of inspector, provincial inspector, and of communal or rural inspector of the health service.

They could, if necessary, be assisted, or their places might be supplied in the performance of this work, by a member of the board or of the commissions.

4. Reports would be published or issued annually by each branch of the service.

5. Independently of the communication which the three degrees of the hygienic service would maintain with their respective administrations, these branches of the service might maintain continuous relations with each other with regard to all questions within their competence.

6. The greater the independence and the authority of the various branches of the sanitary service in their sphere of action, the greater will be the advantages to public health.

7. The budget of each of these branches of the service would form part of that of the respective administrations to which they might be attached, as is done in the cases of the budget of public instruction and public charity.

II.

The international organization would comprise—

1st. The frequent and regular exchange of communications between the superior hygienic boards of the various countries. These communications would bear principally—

A. *a.* Upon the means used to improve the sanitary conditions of the various localities and of their population;

b. Upon the hygienic measures adopted with a view to mitigating the effects of endemic diseases;

c. Upon the precautions adopted for the purpose of preventing the importation of epidemic or contagious diseases;

d. Upon the opposition of foci or of endemic diseases;

e. Upon measures adopted to combat epizooties.

B. Upon the results obtained in each of these cases;

C. Upon the statistical data collected or to be collected with a view to elucidating the problems of public hygiene.

2d. The periodical meeting of International Sanitary Conferences, (*such* as, for instance, the Washington Conference.)

A correct copy.

EDOUARD SÉVE.

Mr. LOWNDES submitted the following resolution, which was read, considered, and agreed to:

That the Chairman submit the propositions of the American delegates in their order for discussion and for a vote thereon, and that no resolution or discussion shall be in order but discussion and resolutions cognate thereto, until all of said propositions shall have been acted on.

The Chairman stated that the first business in order under the resolution just adopted would be the propositions of the United States delegates, which would be read by paragraph for consideration.

The preamble was read, as follows:

Nations have at present ample power to prevent, without any breach of their international obligations, the introduction into their territories of contagious or infectious diseases. But there is often an omission to exercise that power when there is real danger, or an unnecessary exercise of power to avert an imaginary danger. These mistakes arise from two sources: 1st, ignorance of the real state of the facts in the country where the danger lies; 2nd, the omission to communicate to other countries the knowledge which actually exists.

On motion, the words "at present ample" were stricken out, and the words "an inherent" inserted in lieu thereof.

On motion of Mr. SCHUMACHER, the word "principal" was inserted between the words "two" and "sources" in line 5.

On motion, the word "which," in the 6th line, was stricken out, and the words "of facts" inserted in lieu thereof, and the word "ascertained" substituted for "exists" in the 8th line.

Mr. SCHUMACHER moved to strike out the last sentence entirely, beginning with "These mistakes."

The vote was taken, and the motion disagreed to.

The preamble, as amended, was then adopted, Mr. SCHUMACHER voting in the negative. Mr. SCHUMACHER offered the following resolution, which, after discussion, was disagreed to :

That the first two articles in the projet submitted by the United States delegates be not discussed by this Committee, but that they be respectfully reported back to the Conference for its consideration.

The first United States proposition was then read, as follows:

The remedies for these evils seem to be, in outline:

1st. That each Government should bind itself to obtain seasonable and accurate information of all facts bearing upon the public health in its territories.

On motion of Dr. CABELL, the words "it is desirable that" were inserted before "each;" the words "bind itself to" after "should" stricken out, and the words "as far as practicable" inserted before "seasonable."

On motion of Dr. VAN LEENT, the word "dominions" was substituted for "territories."

On motion of Dr. TACHÉ, the words "of all facts" after the word "information" were stricken out.

On motion of Dr. CERVERA, the word "scientific" was inserted after "accurate."

The first proposition as amended was then adopted.

The 2nd United States proposition was then read, as follows:

2nd. Each Government should bind itself to communicate promptly its information to the other parties to the Conference.

On motion of Dr. CABELL, the words "It is desirable that" were inserted before "each," and the words "binds itself to" stricken out.

The 2nd proposition as amended was then adopted.

Mr. SÉVE laid before the committee the following table:

Société Royale de Médecine Publique du Royaume de Belgique.

Province de.....
Arrondissement de.....
Commune de.....

Statistique Médicale et Hygénique dressée par M. le Docteur.....

Mois de..... 18....

Expédié le..... (Signature.)
Reçu à Bruxelles le.....
Inscrit à l'Indicateur sous le N°.....

Notes Explicatives.

- (a.) L'âge des personnes décédées sera désigné par jours pour les enfants de 0 à 1 mois par mois pour ceux âgés de 1 mois à 2 ans, et par années pour les individus ayant dépassé deux ans.
- (b.) La profession des parents sera indiquée pour les enfants décédés; celle du mari, pour la femme sans profession.—Les ouvriers seront distingués des patrons par le signe O/qui précédera la désignation du métier. Les enfants morts qui fréquentaient l'école, la désignation *éc* qui précédera la profession des parents.
- (c.) La qualification d'indigent sera réservée pour les personnes pauvres qui recevaient des secours de la charité officielle.
- (d.) Toutes les fois que le médecin signataire aura constaté dans l'habitation de la personne décédée une cause notable d'insalubrité, il en fera mention dans cette colonne.
- (e.) Pour désigner les maladies causes de décès, on suivra autant que possible la nomenclaturée

française et flamande, élaborée jadis par une Commission officielle (MM. Bellefroid, Janssens et Theis,) portée en 1858 à la connaissance de tous les praticiens du pays par circulaire de MM. les Gouverneurs, et approprié à l'état actuel de la science, comme il est indiqué plus loin.

- (f.) Les observations démographiques ou médicales qui ne pourraiend trouver place sous les rubriques précédentes seront insérées dans cette colonne. Le médecin devra y consigner, les observations météorologiques, telles que: hauteur barométrique, empérature, pluie tombée, temps et vents, inclinaison, déclinaison de l'aiguille aimantée, etc., etc.

Nota.—Les réponses aux indications ci-dessus demandées restent naturellement limitées à ce qu'autorise la conscience du médecins.

SOCIÉTÉ ROYALE
DE
MÉDECINE PUBLIQUE DU ROYAUME DE BELGIQUE

Province de
Arrondissement de
Commune de

STATISTIQUE MÉDICALE ET HYGIÉNIQUE.

État mensuel dressé par M. le Docteur

Membre effectif de la Société royale de Médecine publique.

MOIS DE 18

DATE du Décès	AGE (a)			SEXE	ÉTAT CIVIL					PROFESSION (b)	ÉTAT D'AISSANCE — (c) Riche Aisé Pauvre Indigent	RESIDENCE			CONDITIONS Hygiéniques De l'Habitation — (d) Bonnes Passables Mauvaises	MALADIE OU ACCIDENT CAUSE DU DÉCÈS (e)					Consti- tution de sujet	OBSERVA- TIONS. (f)		OBSERVA- TIONS GÉNÉRALES			
	Ans	Mois	Jours		Légitime	Illégitime	Célibat	Marié	Veuf			Commune	Rue	No		Étage	Dénomi- nation — Maladie principale et consécutives	Durée	Marche — Aiguë Subaiguë Chronique	Nature Épidémique Sporadique Infectieuse ou Contagieuse Héréditaire		CAUSE de la Maladie ou de l'Accident	Médicales		Météorologiques		
Mois.	Jour	Ans	Mois	Jours	Masculin	Féminin	Légitime	Illégitime	Célibat	Marié	Veuf	(b)	Riche Aisé Pauvre Indigent	Commune	Rue	No	Étage	Bonnes Passables Mauvaises	Dénomi- nation — Maladie principale et consécutives	Durée	Marche — Aiguë Subaiguë Chronique	Nature Épidémique Sporadique Infectieuse ou Contagieuse Héréditaire	CAUSE de la Maladie ou de l'Accident	Consti- tution de sujet	Médicales	Météorologiques	

Observations sur les desiderata de l'hygiène publique, constatés dans la commune ainsi que dans les habitations où ont eu lieu des décès causés par des maladies, zymotiques, épidémiques, etc.

Nomenclature Syncrétique des Principales Affections Causées de Décès en Belgique.

1^{re} CLASSE.

Mort-nés avant terme.
 “ à terme.
 Débilité congénitale.
 Vices d'organisation, (Hydrocéphalie, spina, etc.)
 Débilité sénile.

2^e CLASSE.—MALADIES SPÉCIFIQUES GÉNÉRALES, EPIDÉMIQUES, MIASMATIQUES, INFECTIEUSES.

Angine croupale et diphtérie.
 Choléra.
 Dyssenterie.
 Coqueluche.
 Grippe.
 Erysipèle.
 Scarlatine.
 Suette.
 Variole.
 Fièvre puerpérale.
 “ récurrente.
 “ typhoïde.

5^e CLASSE.—MALADIES SPÉCIFIQUES GÉNÉRALES, VIRULENTES, TRANSMISIBLES PAR INOCULATION.

Charbon.
 Morve.
 Pustule maligne.
 Rage.
 Syphilis héréditaire.
 “ acquise.

4^e CLASSE.—MALADIES SPÉCIFIQUES GÉNÉRALES, DIATHÉSIQUES, CONSTITUTIONNELLES.

Cancer.
 Dartres, (Herpétisme.)
 Goutte.
 Rhumatisme.
 Rachitisme.
 Tubercules articulaires.
 “ cérébraux.
 “ mésentériques.
 “ pulmonaires.
 “ spinaux, (outabes dorsalis.)

5^e CLASSE.—MALADIES SPÉCIFIQUES GÉNÉRALES, PAR INTOXICATION.

Delirium tremens, intoxication alcoolique.
 Fièvre intermittente, intox. paludéenne.
 Intox. métallique aiguë ou lente. (Arsenic, mercure, phosphore, plomb, etc.)
 Intox. par matières organiques, (Ergotisme, etc.)

6^e CLASSE.—MALADIES GÉNÉRALES PAR ALTÉRATION DU SANG.

Anasarque.
 Anémie.
 Chlorose.
 Diabète.
 Leucocythémie.
 Pléthore.
 Purpura et maladie de Werlhof.
 Pyohémie, résorption purulente.
 Scorbut.
 Urémie.

7^e CLASSE.—MALADIES DU SYSTÈME NERVEUX SENSITIF OU MOTEUR A LOCALISATION INDÉTERMINÉE.

Ataxie locomotrice.
 Chorée.
 Convulsions.
 Démence, folie.
 Idiotie.
 Manie.
 Eclampsie puerpérale.
 Catalepsie.
 Epilepsie.
 Hystérie.
 Paralyse générale.
 “ essentielle des enfants.
 Tetanos.
 Trismus.

8^e CLASSE.—MALADIES LOCALES DU CERVEAU ET DE LA MOELLE.

Encéphalite, méningite.
 Méningite, cérébro-spinale.
 Myélite.
 Ramollissement du cerveau.
 “ de la moëlle.
 Syncope.

9^e CLASSE.—MALADIES DES ORGANES DE LA CIRCULATION.

Anévrismes (siège et forme.)
 Angiose, (leucophlegmasie, phlébite, varices.
 Altérations organiques du cœur.
 Endo- et péricardite, (non rhumatismales.)
 Gangrène, (siège.)
 Hémorroïdes.

10^e CLASSE —MALADIES DES VOIES RESPIRATOIRES.

Angine de poitrine.
 Anthracose pulmonaire.
 Asthme.
 Bronchite.
 Emphysème pulmonaire.
 Empyème.
 Goitre.
 Hydrothorax.
 Laryngite (inflamm.)
 Œdème de la glotte.
 Pleurésie.
 Pneumonie.

11^e CLASSE.—MALADIES DES ORGANES DE LA DIGESTION.

Amygdalite.
 Aphthes et muguet.
 Enterite, lientérie.
 Entozoaires, (quel helminthes?)
 Gastrite.
 Ramollissement de l'estomac.
 Glossite et pharyngite.
 Hernies.
 Ileus.
 Noma.
 Parotidite.
 Péritonite.
 Stomatite.

12^e CLASSE.—MALADIES DU FOIE ET DE LA RATE.

Atrophie jaune aiguë du foie.
 Calculs biliaires.
 Cirrhose du foie.
 Hépatite.
 Ictère.
 Splénie.

13^e CLASSE.—MALADIES DES VOIES URINAIRES.

Calculs rénaux et vésicaux.
 Cystite.
 Maladie bronzée d'Addison.
 Maladie de Bright.
 Néphrite.
 Prostatite.

14^e CLASSE.—MALADIES DES ORGANES GÉNITAUX.

Hématocèle retro-utérine.
 Kyste ovarique.
 Métrite.
 Ovarite.
 Polype utérin.
 Suitte de couches (préciser.)

15^e CLASSE.—MALADIES DU SYSTÈME OSSEUX.

Carie et nécrose.
 Périostite.
 Mal de Pott.
 Tumeur blanche.
 Osteo-malacie.

16 CLASSE.—MALADIES DE LA PEAU ET DU TISSU CELLULAIRE.

Anthrax.
 Elephantiasis et ichthyose.
 Pemphigus des nouveau-nés.
 Phlegmon et abcès.
 Sclérème.
 Ulcères.

17^e CLASSE.—ACCIDENTS DIVERS.

Accident.
 Suicide.
 Homicide.
 Inanition.

(Asphyxie, immersion, suspension, brûlures, blessures par écrasement, armes à feu, instrument tranchant, chute, etc.)

18^e CLASSE.—MORTS PAR CAUSES INCONNUES.

Causes non déclarées ou indéterminées.
 Causes déclarées *inconnues*.
 Morts subites, sans causes connues.

Dr. AMADO offered the following resolution:

— That for the purpose of giving to the international communications on the condition of the public health indispensable uniformity, each nation represented in the Conference should publish a weekly bulletin of the statistics of the mortality in its principal towns and seaports.

After discussion, the question was taken and it was decided in the affirmative, and numbered 3; yeas 5, nays 3, as follows:

Yeas—Dr. AMADO, Dr. CABELL, Mr. SÉVE, Mr. SCHUMACHER, and Dr. CERVERA—5.

Nays—Dr. TACHÉ, Dr. VAN LEENT, and Dr. ALVARADO—3.

Dr. ALVARADO stated the reason he voted against the proposition was because he did not consider the subject in proper time and order.

The 3rd United States proposition was then read, as follows:

Each Government should bind itself to give to the consul or accredited agent of the others access to all hospitals and all the records of the public health.

Dr. VAN LEENT moved to strike out the proposition altogether, and submitted the following reasons:

Argum. I. I believe there will not be found one consul in the world who, respecting himself and his honorable position, will accept this mandate of visiting hospitals in order to see with his own eyes if there *is* or *not* contagious or infectious diseases treated in the hospitals and of what kind those diseases are. By accepting such a mandate he will find himself at once charged with a heavy burden of responsibility on matters that are not in his way, to regard, less to decide—in a word, a business totally strange to him. Nevertheless, on accepting the prerogative, he accepts at the same time the duties that it imposes. Here he is (supposing his admission to hospitals for these purposes) in the most difficult of all circumstances: on the one side to conceal his incompetence in the matter, on the other to look in affairs and to make a decision that he can with no possibility do. How will he make out if the cases that are before him are variolæ or varioloid, abdominal typhus or true typhus, typhus or acute miliary tuberculosis, cholera or pernicious fever, bilious remittent fever, or yellow fever? I think he would compromise himself by entering into the medical business, and should at once refuse a mandate that no Government should lay upon his shoulders. The honorable and honored—let me say sacred position of the consuls—and the respect, that the Governments ought to forbid them, it is my settled persuasion, to meddle with this business.

Argum. II. But suppose there would be found a consul willing to accept and execute this mandate. I doubt if he would find, from the authorities he has to communicate with, the necessary aid. I am certain that such an uncommon and till now unknown intervention in the household of hospitals will meet nothing but controversy. We must understand that there are so many hospitals where it will be, if not impossible, at least very difficult, to be admitted, but where contagious and infectious diseases may declare themselves or be imported; *p. examp.*, the maternities, the women hospitals, the hospitals for special and specific diseases. Can the consul or the consuls (there may be twenty or thirty consular visits on one day) be admitted to such a hospital? The contagious diseases are not generally treated in special hospitals; but in their dependencies where there is a special building, sometimes a barrack, sometimes a room particularly set apart for the treatment of contagious and infectious diseases. Now, that building, that room, that barrack must and should be totally *isolated*, and no admittance allowed there. The visiting consuls are retained at the outer entrance by the *imperative, admission strictly forbidden*.

Concerning the hospital registers or records, no medical chief of a hospital will open his register to any authority but the inspector of his service, acting in the name of the department to which he is related. Medical secrets ought not to be violated.

Argum. III. A third and last, not least, a strong argument against the article, is the want of confidence, the *distrust*, that it shows against the Governments that bind themselves to the two articles precedent.

I am sure the Governments will never agree to such control over their prompt and trustworthy notifications. Let the Governments be responsible for the loyalty and truth of their information; and let us not support by our votes a measure that should be (I dare to say that I will not be alone of this opinion and persuasion) a serious obstacle to Governments in giving adhesion to an INTERNATIONAL CONVENTION the object of our Conference.

Mr. SCHUMACHER, Mr. ARCHIBALD, and Dr. TACHÉ took substantially the same ground as Dr. VAN LEENT.

Mr. SÉVE thought that the consuls ought to have the power mentioned by the 3d United States proposition.

Dr. TURNER offered the following as a substitute for No. 3, which was read, considered, agreed to, and numbered 4—Dr. VAN LEENT and Dr. TACHÉ accepting, except as to the 3d proposition :

“— It is desirable that each Government should promptly give the consuls and accredited agents of the others at seaports and principal towns the information mentioned in propositions 1, 2, and 3.”

Mr. SCHUMACHER stated that he would be unable to be present at the meeting of the Committee on Saturday, as he was compelled to be in New York on that day, and desired to reserve his vote on all questions coming up during his absence. He also requested that the various protocols be sent him, and stated that he would return Monday morning.

The Committee then adjourned until Saturday, January 15, at 11 o'clock A. M.

THE SECRETARY OF THE COMMITTEE:
THOMAS J. TURNER.

THE CHAIRMAN OF THE COMMITTEE:
E. M. ARCHIBALD.

PROTOCOL NO. 4.

Fourth day's proceedings of the Committee appointed by the INTERNATIONAL SANITARY CONFERENCE, January 15, 1881.

PROTOCOL No. IV.

WASHINGTON, *January 15, 1881.*

The Committee met at 11 o'clock P. M. at the Department of State, pursuant to adjournment.

Present—Mr. EDOUARD SÉVE, Dr. RAFAEL CERVERA, Dr. J. L. CABELL, Dr. T. J. TURNER, Mr. J. HUBLEY ASHTON, Mr. JAMES LOWNDES, Hon. E. M. ARCHIBALD, Dr. J. C. TACHÉ, Dr. DON IGNACIO ALVARADO, Dr. F. J. VAN LEENT, and Prof. JOSÉ JOAQUIM DA SILVA AMADO.

Absent—Mr. H. A. SCHUMACHER, by permission.

The reading of the protocols of the previous days was dispensed with.

The Committee then took up for consideration the projet submitted by the delegates from the United States.

Dr. CERVERA offered the following:

Vessels ought to undergo, before and after their loading, an examination made by a physician of the country from which they sail; an examination in which the agent of the country of destination might assist, in order to be able better to attest its fidelity.

Dr. AMADO offered the following as a substitute:

It is desirable that the consuls should be assisted by medical sanitarians, who will furnish them with all the information necessary. These medical men should belong to an international corps of sanitarians or épidémiologists residing in towns where such diseases prevail; the duty of these medical men being not only to assist the consuls, but to study scientifically the causes, the progress, the prevention, and the treatment of contagious diseases, and to inform the boards of health of the different nations of all that relates to the public health.

Dr. CERVERA withdrew his proposition and accepted that of Dr. AMADO.

The question was taken, and Dr. AMADO's proposition adopted.

Dr. TACHÉ dissented, and Mr. SCHUMACHER was absent.

The fourth proposition was read, as follows:

Each Government consents that its ships, before and after taking in cargo, may be subjected to an examination in port by the agent of the country of destination to meet the sanitary requirements of the country of destination.

Dr. TACHÉ offered the following as a substitute:

It is desirable that each Government should consent that its ships, before and after taking in cargo, may be subjected to adequate sanitary examination in all ports by the agent of the country of destination under such rules as may be laid down by international agreement or treaty.

The question was taken, and decided in the affirmative; Drs. ALVARADO and CERVERA abstaining from voting.

The Committee then took a recess until 2¼ o'clock.

After recess.

The Committee reassembled pursuant to adjournment taken, and resumed the consideration of the propositions submitted by the Delegates of the United States.

The 5th proposition was read, as follows:

No clearance shall be granted without a bill of health signed by the agent of the country of destination in the accompanying form. In case of no such agency in any port of clearance, or non-attendance or disability of such agent, the absence of such bill of health to work no injury in the country of destination.

After discussion,

Dr. TURNER offered the following as a substitute :

It is desirable that each Government should consent to require its ships to carry an International Bill of Health in the accompanying form, signed by the accredited agent of the country of destination, upon an examination provided in the 4th resolution. In case of no such agency in any port of clearance, or non-attendance or disability of such agent, the absence of such bill of health to work no injury to the ship in the country of destination.

The question was taken upon the substitute offered by Dr. TURNER, and was decided in the affirmative ; Drs. ALVARADO and CERVERA abstaining from voting.

Dr. CABELL offered the following resolution, which was read, considered, and disagreed to :

Resolved, That the accredited agent of the country of destination granting the bill of health as provided for by the last proposition shall have authority to collect such additional information to that communicated by the local authorities of the port as provided by article 2, as may, in his judgment, be necessary to satisfy the requirements of the sanitary authorities at the port of destination.

Dr. ALVARADO declined to vote on the above resolution.

Dr. ALVARADO submitted the following, the consideration of which the Committee decided to defer until all the propositions submitted by the United States had been disposed of :

The propositions are as follows :

The questions which the Government of the United States has intended to submit to the examination of the several Powers, and with which object this Conference has been instituted, are clear and expressly specified in the memorandum of the 29th of July, 1880, annex No. 2 of the Protocol No. I. Consequently, the Conference has to consider them under all points of view, as also the other questions which may strictly spring therefrom or may lead to their satisfactory solution.

The questions alluded to are textually these :

“A.—The establishment of a reliable and satisfactory international system of notification as to the existence of contagious and infectious diseases, more especially cholera and yellow fever.

“B.—The establishment of a uniform and satisfactory system of bills of health, the statements in which shall be trustworthy as to the sanitary condition of the port of departure, and as to the condition of the vessel at the time of sailing.”

The undersigned believes that the best system of international notification could be obtained by means of scientific agents, appointed *ad hoc*, and not through any other agent, by the considerations deduced from the perusal of the present document. These agents ought to be two, viz., a physician, appointed by the Power the sanitary state of which port is desired to be known, and another physician, appointed by the Power interested in ascertaining that state.

The scientific character of said agents is an indispensable condition, as physicians are the only connoisseurs who, by reason of their profession, are in a position to appreciate most accurately the sanitary state of a locality. Any other person, however learned he may be supposed to be, cannot make these observations, as said persons lack in medical knowledge.

To develop and make this idea feasible it will be necessary to create a system of international scientific boards, subject in their fundamental proceedings to general regulations uniform to all the Boards.

To this effect each one of the signatory Powers of the final protocol can appoint a physician for each port or city which they may think proper, who will reside in the place designated to him. The meeting of a majority of the physicians of several Powers residing in a locality and presided over by the highest civil authority of the same will constitute the International Sanitary Board of that place.

The civil authority will transmit to each Board all the information the Board may ask for, and which may lead to the fulfilment of its mission, such as the daily entries in the civil and military hospitals, with specification of the diseases, &c.; these documents could be au-

thenticated by a committee of the same Board whenever it may be thought proper. This is the simplest, the most accurate, practicable, and trustworthy way which can be employed in order that each Power may ascertain, through its delegates, the sanitary state of any place whatever; besides the guarantee obtained by the public faith given to the authority of the place, it has the honesty and convisership of its delegate, who, as has been said above, can ultimately verify the accuracy of the official data.

On proceeding to the organization of the Boards, the questions relative to Bills of Health and to all the others derived from the adoption of an international system of sanitary notification have naturally to be referred.

Although when the obligations and duties of International Boards of Health are defined—everything that refers to them will be properly subject to regulations—it is necessary, in order that I may finish expressing my idea, to put forward a certain general basis to which said Boards shall conform their proceedings.

A. All the official acts of the Boards which may have for their final object to make known to a foreign Government the sanitary state of a locality, such as a visit to the vessels at the time of sailing, issuance of bills of health, or other analogous work, will be executed in the name of the Board by the national physician of the locality and that of the foreign Government interested.

B. The technical experiences which might arise from the appreciation of a fact, such as the nature of the disease as certain patients may have, the suspicious character of the sanitary state of a vessel at the time of sailing, or any other analogous fact will be adjusted by any other physician of the Board, conjointly appointed by the persons disagreeing, and in case they cannot agree upon the physician to act as umpire, then the Board will have to adjust said differences.

C. The Boards shall not be able to decide any question referring to the interpretation of any article of the final protocol, as this point will be treated in a special chapter; but it is of its exclusive competence to declare the existence of an epidemic in its place of residence.

The obligations and duties of the Boards will not be limited to those pointed out in the above paragraphs; they will be specified in the international regulations, which will be issued after ascertaining whether the Conference accepts the capital idea of this projet, which can be outlined in the following terms:

1st. The best system of international sanitary notifications is the one giving information therein to the Powers of the port of departure and to the Power of the port of arrival.

2d. The notifications shall be made by means of scientific persons; that is to say, by two physicians, one appointed by the Power of the port of departure, and the other by the Power of the port of arrival.

3d. The municipal authority of the port of departure shall authenticate the notification.

4th. In case of disagreement of opinions between the two physicians in regard to any technical point, it shall be decided by a scientific person as umpire, conjointly appointed and chosen from among the scientific persons of the other Powers. When this common agreement cannot possibly be had, then the majority of the scientific persons, resolved into a committee, shall decide the technical question.

5th. Special regulations will determine the organization of this system and will provide, as far as possible, for the carrying out everything arising therefrom.

6th. The Bills of Health will not contain more information than that relating to the sanitary state of the port and its surroundings and of the vessel.

(Signed) DR. Y. ALVARADO.

On motion of Dr. CERVERA the vote by which Dr. CABELL's resolution was disagreed to was reconsidered.

Dr. AMADO offered the following as a substitute, which was read, considered, and agreed to; Dr. TACHÉ abstaining from voting:

In those towns where there are sanitary physicians belonging to the international body,

they should have the right to examine everything that can help them to form an accurate idea of the sanitary condition of the country.

Mr. SÉVE offered the following:

As the necessity of the permanency of a scientific organization has been proclaimed by this Committee, it is desirable that a permanent commission should be established in the National Board of Health at Washington, or in any city that may be found proper.

The question was taken, and it was decided in the affirmative, yeas 4, nays 3, as follows:

Yeas—Drs. AMADO, ALVARADO, CERVERA, and Mr. SÉVE.

Nays—Drs. TACHÉ, CABELL, and VAN LEENT.

Absent—Mr. SCHUMACHER.

The 6th proposition was read, as follows:

Penalties may be inflicted under general laws at the port of destination for violation of these rules or any declared offence against the public health.

Dr. CABELL moved that it be stricken out.

The motion was agreed to.

The 7th proposition was read, as follows:

A bill of health granted in compliance with these rules shall be adequate evidence of the health of the ship at the port and time of departure.

Dr. TURNER offered the following as an amendment, which was read, considered, and agreed to, Drs. AMADO, ALVARADO, and CERVERA abstaining from voting:

It is desirable that the bill of health granted in compliance with these rules shall be issued gratis.

Dr. TURNER also offered the following as a substitute for No. 7, which was unanimously agreed to:

It is desirable that the bill of health granted in compliance with these rules shall be considered adequate evidence of the health of the ship at the port and time of departure.

Dr. CERVERA asked permission to have the following printed in the protocol, which was granted:

Any vessel which shall sail from a port with a clean bill of health furnished by the authorities of the country without being vised by the agent of the country of destination will be considered as suspected, and treated as such.

The bill of health was read, as follows:

INTERNATIONAL BILL OF HEALTH.

I,, (consul, consular agent, or other officer empowered by law to sign,) at the port of, do hereby state that the vessel hereinafter named clears from this port under the following circumstances:

Name of vessel:	Nature, (vessel-of-war, ship, schooner, &c.):
Tonnage:
Apartments for passengers, No.:	Guns:
Destination:	Where last from:
Name of medical officer, (if any):	Name of captain:
Total number of passengers: 1st cabin, . . . ;	Total number of crew:
2d cabin, . . . ; steerage, . . .	Cargo:

VESSEL.

1. Sanitary condition of vessel, (before and after reception of cargo, with note of any decayed wood.) Note disinfection of vessel:
2. Sanitary condition of cargo:

- 3. Sanitary condition of crew
- 4. Sanitary condition of passengers:
- 5. Sanitary condition of clothing, food, water, air-space, and ventilation:

PORT.

- 1. Sanitary condition of port and adjacent country—
 - a. Prevailing disease, (if any):
 - b. Number of cases of and deaths from yellow fever, Asiatic cholera, plague, small-pox, or typhus fever during the week preceding—
- | | | |
|--|--|---|
| Number of cases of—
Yellow fever:
Asiatic cholera:
Plague:
Small-pox:
Typhus fever: | | Number of deaths from—
Yellow fever:
Asiatic cholera:
Plague:
Small-pox:
Typhus fever: |
|--|--|---|
- c. Population according to the last Census :
 - d. Total deaths from all causes during the preceding month:

2. Any circumstances affecting the public health existing in the port of departure to be here stated :

I certify that the foregoing statements are made by, who has personally inspected said vessel; that I am satisfied that the said statements are correct; and I do further certify that the said vessel leaves this port, bound for, in the

In witness whereof I have hereunto set my hand and the seal of office, at the port of, this . . . day of, 188 , . . . o'clock.

[SEAL.], *Consul.*

Dr. VAN LEENT stated that he had to thank the United States delegates for presenting such a form for an International Bill of Health; that he had seen a great many bills of health, but that he had never seen a document so complete as that here submitted.

On motion of Dr. TURNER, the form for an International Bill of Health submitted by United States delegates was unanimously adopted.

The Committee then adjourned until Monday, January 17, 1881, at 11 o'clock A. M.

THE SECRETARY OF THE COMMITTEE: THOMAS J. TURNER.	THE CHAIRMAN OF THE COMMITTEE: E. M. ARCHIBALD.
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PROTOCOL NO. 5.

Fifth day's proceedings of the Committee appointed by the INTERNATIONAL SANITARY CONFERENCE, January 17, 1881.

PROTOCOL No. V.

WASHINGTON, *January* 17, 1881.

Present—

Mr. EDWARD SÉVE, Dr. RAFAEL CERVERA, Dr. J. L. CABELL, Dr. T. J. TURNER, Mr. JAMES LOWNDES, Hon. E. M. ARCHIBALD, Dr. J. C. TACHÉ, Dr. IGNACIO ALVARADO, Dr. F. J. VAN LEENT, and Prof. DA SILVA AMADO.

The protocol of the second and third day's proceedings was submitted for correction.

The Chairman laid before the Committee the following letter from Mr. H. A. SCHUMACHER :

“IMPERIAL GERMAN CONSUL-GENERAL,
“NEW YORK, *January* 16, 1881.

“MR. CHAIRMAN :

“I have the honor to inform you that official duties prevent me from being present at the Monday meeting of your Committee, and to ask you to be kind enough to cause the mention of my absence to be made in the records of the Committee, and also in the report to the Conference, if such a report should be approved during the time of my prevention.

I am, Mr. Chairman, very respectfully yours,

(Signed) H. A. SCHUMACHER,
Delegate of the German Empire.

The propositions as amended were then submitted for final action.

The preamble and first proposition were read and adopted without change.

Mr. SCHUMACHER absent.

The 2nd proposition was read, as follows :

“It is desirable that each Government should communicate promptly its information to the other parties to the Conference.”

On motion, the word “contracting” was inserted before “parties” in the second line, and the words “to the Conference” stricken out.

The proposition as amended was agreed to.

Mr. SCHUMACHER absent.

The 3rd proposition was read, as follows :

3rd. For the purpose of giving to the international communications on the condition of the public health indispensable uniformity, each nation represented in the Conference should publish a weekly bulletin of the statistics of the mortality in its principal towns and seaports.

The question was taken, and it was decided in the affirmative—yeas, 5 ; nays, 2 ; absent, 1, as follows :

Yeas—Drs. AMADO, CERVERA, CABELL, ALVARADO, and Mr. SÉVE—5.

Nays—Drs. TACHÉ and VAN LEENT—2.

Absent—Mr. SCHUMACHER.

The 4th proposition was read, as follows :

4th. It is desirable that each Government should promptly give to the consuls and accredited agents of the others at seaports and principal towns the information mentioned in propositions 1, 2, and 3.

The question was taken, and it was decided in the affirmative, Drs. TACHÉ and VAN LEENT assenting *pro tanto* ; but excepting as to third proposition.

The 5th proposition was read, as follows :

5th. It is desirable that the consuls should be assisted by medical sanitarians, who should furnish them with all the necessary information.

These medical men should belong to an international corps of sanitarians and épidé-

miologists, residing in towns where endemics or epidemics prevail, the duty of these medical men being not only to assist the consuls, but to study scientifically the causes, the progress, the prevention, and the treatment of contagious diseases, and to inform the Boards of Health of the different nations of all that relates to the public health.

Dr. CABELL moved that the 5th proposition be reconsidered, and stated that if this motion should be agreed to, he would offer the following resolution :

That inasmuch as the proposition submitted by the delegate from Portugal involves the necessity of the presence of an international commission of medical officers at all the ports at which contagious and infectious diseases are likely to exist, and that the consideration of such a policy as the basis of an international treaty has not been referred to the Conference by the provision of the joint resolution of the Congress of the United States, this Committee considers that it is not authorized to recommend its adoption for that end, but that it desired to put on record its approval of its general spirit and tenor, and express the hope that the principles involved in this proposition may be adopted and carried into effect at some future Conference duly empowered for that purpose.

The motion to reconsider was disagreed to, and the proposition was reaffirmed by the following vote :

Yeas—Drs. AMADO, VAN LEENT, CERVERA, and Mr. SÉVE.

Nays—Drs. CABELL and TACHÉ.

Not voting—Dr. ALVARADO.

Absent—Mr. SCHUMACHER.

The 6th proposition was read, as follows :

6th. It is desirable that each Government should consent that its ships, before and after taking on cargo, may be subjected to adequate sanitary examination in all ports by the agent of the country of destination, under such rules as may be laid down by international agreement or treaty.

The question was taken, and it was decided in the affirmative, Drs. ALVARADO and CERVERA abstaining from voting.

Absent—Mr. SCHUMACHER.

The 7th proposition was read, as follows :

7th. It is desirable that each country should consent its ships to carry an international Bill of Health in the accompanying form, signed by the accredited agent of the country of destination, upon an examination provided in the 6th resolution.

In case of no such agency in any port of clearance, or non-attendance or disability of such agent, the absence of such Bill of Health to work no injury to the ship in the country of destination.

The question was taken, and it was decided in the affirmative, Drs. ALVARADO and CERVERA abstaining from voting.

Absent—Mr. SCHUMACHER.

The 8th proposition was read, as follows :

8th. In those towns where there are sanitary physicians belonging to the international body, they should have the right to examine everything that can help them to form an accurate idea of the sanitary condition of the country.

The question was taken, and it was decided in the affirmative—yeas, 6 ; nays, 1 ; absent 1 ; as follows :

Yeas—Drs. ALVARADO, AMADO, CABELL, CERVERA, VAN LEENT, and Mr. SÉVE—6.

Nays—Dr. TACHÉ—1.

Absent—Mr. SCHUMACHER—1.

The 9th proposition was read, as follows :

9th. As the necessity of the permanency of a scientific organization has been proclaimed by this Committee, it is desirable that a permanent commission should be established in the "National Board of Health" at Washington, or in any city that will be found proper.

The Chairman stated that he had not clearly comprehended the 9th proposition when first offered, or he would have ruled it out of order. It selects the United States out of all the

countries of the world, and delegates to it the performance of certain duties which the Committee has no right to do. He stated, further, that he thought he would call the attention of the mover to the fact that the resolution was out of order, and he hoped he would withdraw it.

Mr. SÉVE stated he offered the resolution because it followed naturally from and was a sequence of proposition No. 8. His idea was that some permanent organization should be formed, and he named the National Board of Health in connection with his resolution, as a special expression of confidence in that Board and a mark of courtesy.

Dr. TURNER moved to strike out all after "established."

Mr. SÉVE accepted the amendment.

The question was taken and decided in the affirmative—Dr. TACHÉ dissenting.

Absent—Mr. SCHUMACHER.

The 10th proposition was read, as follows :

10th. It is desirable that the Bill of Health issued in compliance with international rules shall be issued gratis.

Drs. ALVARADO, AMADO, and CERVERA reserve their votes.

Mr. SCHUMACHER absent.

The 11th proposition was read, as follows :

It is desirable that the Bill of Health issued in compliance with international rules shall be considered evidence of the health of the ship at the port and time of departure.

Mr. SCHUMACHER absent.

The form for International Bill of Health was then read and adopted, as follows :

INTERNATIONAL BILL OF HEALTH.

I,, (consul, consular agent, or other officer empowered by law to sign,) at the port of, do hereby state that the vessel hereinafter named clears from this port under the following circumstances:

Name of vessel:	Nature, (vessel-of-war, ship, schooner, &c.):
Tonnage:
Apartments for passengers, No.:	Guns:
Destination:	Where last from:
Name of medical officer, (if any):	Name of captain:
Total number of passengers: 1st cabin, . . . ;	Total number of crew:
2d cabin, . . . ; steerage, . . .	Cargo:

VESSEL.

1. Sanitary condition of vessel, (before and after reception of cargo, with note of any decayed wood.) Note disinfection of vessel:
2. Sanitary condition of cargo:
3. Sanitary condition of crew
4. Sanitary condition of passengers:
5. Sanitary condition of clothing, food, water, air-space, and ventilation:

PORT.

1. Sanitary condition of port and adjacent country—
 - a. Prevailing disease, (if any):

b. Number of cases of and deaths from yellow fever, Asiatic cholera, plague, small pox, or typhus fever during the week preceding—

Number of cases of—	Number of deaths from—
Yellow fever:.....	Yellow fever:.....
Asiatic cholera:.....	Asiatic cholera:.....
Plague:.....	Plague:.....
Small-pox:.....	Small-pox:.....
Typhus fever:.....	Typhus fever:.....

c. Population according to the last Census :.....

d. Total deaths from all causes during the preceding month :.....

2. Any circumstances affecting the public health existing in the port of departure to be here stated :.....

I certify that the foregoing statements are made by....., who has personally inspected said vessel; that I am satisfied that the said statements are correct; and I do further certify that the said vessel leaves this port, bound for....., in the

In witness whereof I have hereunto set my hand and the seal of office, at the port of....., this....day of....., 188 ,....o'clock.

[SEAL.]

.....,
Consul.

The Committee then took a recess until 3 o'clock P. M.

After Recess.

The Committee reassembled pursuant to recess taken.

Dr. CERVERA offered the following, which was read, considered, and agreed to, and numbered 9, the following numbers to be changed accordingly:

The appearance and the existence of any epidemic disease in cities and ports cannot be well known and attested but by physicians, so that the authority that should certify to the sanitary condition of cities and ports must be a physician responsible for his acts; but in case another administrative agent deliver a bill of health to the vessel leaving the port he must be provided with official information delivered by medical authority. Without this information it will be impossible for him to certify to the health of the vessel, and as the examination of the sanitary condition of a vessel belongs to a medical man, it is desirable that the officer in charge of inspecting the vessels and delivering the bills of health be a physician, and such physician should be attached to the consulate.

Dr. TACHÉ dissenting.

Mr. SCHUMACHER absent.

Dr. CERVERA also offered the following:

The examinations to which vessels should be subjected in order to certify their sanitary condition when the port of departure or its environs are affected with yellow fever will always be incomplete, because in the present state of our knowledge we have no certain means of verifying that condition.

Dr. CABELL stated that, in the opinion of the delegates of the United States, there is no obligation on the part of the Committee to answer directly all the questions submitted in the memorandum of the Honorable Secretary of State, especially where, as in this case, the proposed answer must be chiefly of a negative character; whereupon Dr. CERVERA withdrew his resolution.

Dr. ALVARADO submitted his propositions again, and asked, if the Committee refused to adopt them as a substitute for the other propositions, that they might go in as a minority report.

The propositions are as follows:

The questions which the Government of the United States has intended to submit to the examination of the several Powers, and with which object this Conference has been instituted, are clear and expressly specified in the memorandum of the 29th of July, 1880, annex No. 2 of the Protocol No. I. Consequently, the Conference has to consider them under all points of view, as also the other questions which may strictly spring therefrom or may lead to their satisfactory solution.

The questions alluded to are textually these :

“A.—The establishment of a reliable and satisfactory international system of notification as to the existence of contagious and infectious diseases, more especially cholera and yellow fever.

“B.—The establishment of a uniform and satisfactory system of bills of health, the statements in which shall be trustworthy as to the sanitary condition of the port of departure, and as to the condition of the vessel at the time of sailing.”

The undersigned believes that the best system of international notification could be obtained by means of scientific agents, appointed *ad hoc*, and not through any other agent, by the considerations deduced from the perusal of the present document. These agents ought to be two, viz., a physician, appointed by the Power the sanitary state of which port is desired to be known, and another physician, appointed by the Power interested in ascertaining that state.

The scientific character of said agents is an indispensable condition, as physicians are the only connoisseurs who, by reason of their profession, are in a position to appreciate most accurately the sanitary state of a locality. Any other person, however learned he may be supposed to be, cannot make these observations, as said persons lack in medical knowledge.

To develop and make this idea feasible it will be necessary to create a system of international scientific boards, subject in their fundamental proceedings to general regulations uniform to all the Boards.

To this effect each one of the signatory Powers of the final protocol can appoint a physician for each port or city which they may think proper, who will reside in the place designated to him. The meeting of a majority of the physicians of several Powers residing in a locality and presided over by the highest civil authority of the same will constitute the International Sanitary Board of that place.

The civil authority will transmit to each Board all the information the Board may ask for, and which may lead to the fulfilment of its mission, such as the daily entries in the civil and military hospitals, with specification of the diseases, &c.; these documents could be authenticated by a committee of the same Board whenever it may be thought proper. This is the simplest, the most accurate, practicable, and trustworthy way which can be employed in order that each Power may ascertain, through its delegates, the sanitary state of any place whatever; besides the guarantee obtained by the public faith given to the authority of the place, it has the honesty and convisership of its delegate, who, as has been said above, can ultimately verify the accuracy of the official data.

On proceeding to the organization of the Boards, the questions relative to Bills of Health and to all the others derived from the adoption of an international system of sanitary notification have naturally to be referred.

Although when the obligations and duties of International Boards of Health are defined—everything that refers to them will be properly subject to regulations—it is necessary, in order that I may finish expressing my idea, to put forward a certain general basis to which said Boards shall conform their proceedings.

A. All the official acts of the Boards which may have for their final object to make known to a foreign Government the sanitary state of a locality, such as a visit to the vessels at the time of sailing, issuance of bills of health, or other analogous work, will be executed in the name of the Board by the national physician of the locality and that of the foreign Government interested.

B. The technical experiences which might arise from the appreciation of a fact, such as the nature of the disease as certain patients may have, the suspicious character of the sanitary

state of a vessel at the time of sailing, or any other analogous fact will be adjusted by any other physician of the Board, conjointly appointed by the persons disagreeing, and in case they cannot agree upon the physician to act as umpire, then the Board will have to adjust said differences.

C. The Boards shall not be able to decide any question referring to the interpretation of any article of the final protocol, as this point will be treated in a special chapter; but it is of its exclusive competence to declare the existence of an epidemic in its place of residence.

The obligations and duties of the Boards will not be limited to those pointed out in the above paragraphs; they will be specified in the international regulations, which will be issued after ascertaining whether the Conference accepts the capital idea of this projet, which can be outlined in the following terms:

1st. The best system of international sanitary notifications is the one giving information therein to the Powers of the port of departure and to the Power of the port of arrival.

2d. The notifications shall be made by means of scientific persons; that is to say, by two physicians, one appointed by the Power of the port of departure, and the other by the Power of the port of arrival.

3d. The municipal authority of the port of departure shall authenticate the notification.

4th. In case of disagreement of opinions between the two physicians in regard to any technical point, it shall be decided by a scientific person as umpire, conjointly appointed and chosen from among the scientific persons of the other Powers. When this common agreement cannot possibly be had, then the majority of the scientific persons, resolved into a committee, shall decide the technical question.

5th. Special regulations will determine the organization of this system and will provide, as far as possible, for the carrying out everything arising therefrom.

6th. The Bills of Health will not contain more information than that relating to the sanitary state of the port and its surroundings and of the vessel.

(Signed) DR. Y. ALVARADO.

The Committee, after consideration, declined to adopt Dr. ALVARADO's projet in lieu of that already acted on, and it was ordered to be printed with the report and placed before the Conference as the individual views of Dr. ALVARADO.

The preamble and resolutions, as amended, were then read, as follows:

The Committee appointed by the INTERNATIONAL SANITARY CONFERENCE, called by his Excellency the President of the United States, at its session of the 12th of January, 1881, "to consider and report to the Conference the result of their views respecting the propositions of the delegates of the United States, and at the same time to consider and report upon the propositions contained in the paper of the Delegate of Venezuela, (Mr. CAMACHO,) and any other propositions which might be laid before them by any of the delegates," beg leave to report that they have considered the subject-matters referred to them, and have adopted the following preamble and resolutions, which they respectfully submit for the consideration of the Conference.

The Committee append to this report a paper presented by Dr. IGNACIO ALVARADO, the special delegate of Mexico, as the expression of his views and opinions on the subject-matters in question.

Preamble.

Nations have an inherent power to prevent, without any breach of their international obligations, the introduction into their territories of contagious or infectious diseases. But there is often an omission to exercise that power when there is real danger or an unnecessary exercise of power to avert an imaginary danger. These mistakes arise from two principal sources: 1st, ignorance of the real state of the facts in the country where the danger lies; 2d, the omission to communicate to other countries the knowledge of facts actually ascertained.

Mr. SCHUMACHER dissenting.

Fundamental Propositions.

A. That this Committee recommend to the INTERNATIONAL SANITARY CONFERENCE that it be admitted as an international principle of sanitation that it is highly desirable to adopt an international system of notification concerning sanitary matters and the appearance and disappearance of contagious or infectious diseases.

B. That it is the opinion of this Committee that it would be highly advantageous to permit certain sanitary inspections to be made by foreign agents in ports of various nations, subject to such rules as are necessary for the safeguard of each country's sovereignty and of each country's commercial interests.

Mr. SCHUMACHER suspends his vote.

Special Propositions.

1st. It is desirable that each Government should obtain, as far as practicable, seasonable and accurate scientific information bearing upon the public health in its dominions.

Mr. SCHUMACHER suspends his vote.

2d. It is desirable that each Government should communicate promptly its information to the other contracting parties.

Mr. SCHUMACHER suspends his vote.

3d. For the purpose of giving to the international communications on the condition of the public health indispensable uniformity each nation represented in the Conference should publish a weekly bulletin of the statistics of mortality in its principal towns and seaports.

Yeas—Dr. AMADO, Mr. SÉVE, Mr. SCHUMACHER, Dr. CERVERA, Dr. CABELL, and Dr. ALVARADO.

Nays—Dr. TACHÉ, Dr. VAN LEENT.

4th. It is desirable that each Government should promptly give to the consuls and accredited agents of the others at seaports and principal towns the information mentioned in propositions 1, 2, and 3.

Dr. TACHÉ and Dr. VAN LEENT accepting, except as it refers to the 3rd proposition.

5th. It is desirable that the consuls should be assisted by medical sanitarians, who should furnish them with all the necessary information.

These medical men should belong to an international corps of sanitarians and épidémiologists, residing in towns where endemics or epidemics prevail, the duty of these medical men being not only to assist the consuls, but to study scientifically the causes, the progress, the prevention, and the treatment of contagious diseases, and to inform the Boards of Health of the different nations of all that relates to the public health.

Yeas—Dr. AMADO, Dr. VAN LEENT, Dr. CERVERA, Mr. SÉVE—4.

Nays—Dr. TACHÉ, Dr. CABELL—2.

Abstain—Dr. ALVARADO—1.

Absent—Mr. SCHUMACHER—1.

6th. It is desirable that each Government should consent that its ships, before and after taking on cargo, may be subjected to adequate sanitary examination in all ports by the agent of the country of destination, under such rules as may be laid down by international agreement or treaty.

Dr. CERVERA and Dr. ALVARADO abstain from voting.

7th. It is desirable that each country should consent its ships to carry an international bill of health in the accompanying form, signed by the accredited agent of the country of destination, upon an examination provided in the 6th resolution.

In case of no such agency in any port of clearance, or non-attendance or disability of such agent, the absence of such bill of health to work no injury to the ship in the country of destination.

Dr. ALVARADO and Dr. CERVERA abstain from voting.

Mr. SCHUMACHER absent.

8th. In those towns where there are sanitary physicians belonging to the international

body, they should have the right to examine everything that can help them to form an accurate idea of the sanitary condition of the country.

Yeas—Dr. ALVARADO, Dr. AMADO, Dr. CABELL, Dr. CERVERA, Dr. VAN LEENT, Mr. SÉVE.

Nays—Dr. TACHÉ.

Absent—Mr. SCHUMACHER.

9th. The appearance and the existence of any epidemic disease in cities and ports cannot be well known and attested but by physicians, so that the authority that should certify to the sanitary conditions of cities and ports must be a physician responsible for his acts, but in case another administrative agent deliver a bill of health to the vessel leaving the port he must be provided with official information delivered by medical authority; without this information it will be impossible for him to certify to the health of the vessel, and as the examination of the sanitary condition of a vessel belongs to a medical man it is desirable that the officer in charge of inspecting vessels and delivering bills of health be a physician, and such physician should be attached to the consulate.

Dr. TACHÉ dissenting.

Absent—Mr. SCHUMACHER.

10th. As the permanency of a scientific organization has been proclaimed by this Committee, it is desirable that a permanent commission should be established.

Dr. TACHÉ dissenting.

Absent—Mr. SCHUMACHER.

11th. It is desirable that the Bill of Health issued in compliance with international rules shall be issued gratis.

Drs. ALVARADO, AMADO, and CERVERA reserve their votes.

Mr. SCHUMACHER absent.

12th. It is desirable that the Bill of Health issued in compliance with international rules shall be considered evidence of the health of the ship at the port and time of departure.

Mr. SCHUMACHER absent.

INTERNATIONAL BILL OF HEALTH.

I,, (consul, consular agent, or other officer empowered by law to sign,) at the port of, do hereby state that the vessel hereinafter named clears from this port under the following circumstances:

Name of vessel:	Nature, (vessel-of-war, ship, schooner, &c.):
Tonnage:
Apartments for passengers, No.:	Guns:
Destination:	Where last from:
Name of medical officer, (if any):	Name of captain:
Total number of passengers: 1st cabin, . . . ;	Total number of crew:
2d cabin, . . . ; steerage, . . .	Cargo:

VESSEL.

1. Sanitary condition of vessel, (before and after reception of cargo, with note of any decayed wood.) Note disinfection of vessel:
2. Sanitary condition of cargo:
3. Sanitary condition of crew:
4. Sanitary condition of passengers:
5. Sanitary condition of clothing, food, water, air-space, and ventilation:

PORT.

1. Sanitary condition of port and adjacent country—

- a.* Prevailing disease, (if any):
b. Number of cases of and deaths from yellow fever, Asiatic cholera, plague, small pox, or typhus fever during the week preceding—

Number of cases of—

Yellow fever:
 Asiatic cholera:
 Plague:
 Small-pox:
 Typhus fever:

Number of deaths from—

Yellow fever:
 Asiatic cholera:
 Plague:
 Small-pox:
 Typhus fever:

c. Population according to the last Census :.....

d. Total deaths from all causes during the preceding month:.....

2. Any circumstances affecting the public health existing in the port of departure to be here stated :

I certify that the foregoing statements are made by, who has personally inspected said vessel; that I am satisfied that the said statements are correct; and I do further certify that the said vessel leaves this port, bound for....., in the

In witness whereof I have hereunto set my hand and the seal of office, at the port of....., this....day of....., 188 ,....o'clock.

[SEAL.]

.....,
Consul.

The question taken on their adoption as a whole, and it was decided in the affirmative, Dr. ALVARADO dissenting.

On motion of Dr. CABELL, the Chairman and Secretary were authorized to prepare the report of the Committee for the Conference, to be based on the preamble and resolutions just adopted, and sign the same.

Mr. LOWNDES offered the following resolution, which was read, considered, and agreed to.

Resolved, That the Committee do now rise, and the Chairman report to the Conference the papers referred to it, with the amendments and additions thereto adopted by this Committee.

The Committee then adjourned.

THE SECRETARY OF THE COMMITTEE:
 THOMAS J. TURNER.

THE CHAIRMAN OF THE COMMITTEE:
 E. M. ARCHIBALD.

